Committed Caring Faith Communities The Missouri Department of Mental Health Division of Alcohol and Drug Abuse &

The U.S. Drug Enforcement Administration

present the

2005 Spring Addictions Academy

a 32-hour course on substance abuse designed specifically for faith leaders, congregation members, staff of faith-based community organizations, and other non-traditional service providers

Enrollment closed Session Full.

May 23-27, 2005



Lincoln University – Martin Luther King Hall • 820 Chestnut Street, Jefferson City, MO 65102

The kick-off for the Academy will be **May 23** and will feature guest lecturer **Rev. Edwin Sanders II**, BA, senior servant and founder of the Metropolitan
Interdenominational Church of Nashville, Tennessee. Rev. Sanders' lecture is entitled *Spirituality as an Essential Component of Effective Substance Abuse Prevention*,

Education & Treatment Initiatives.

Other classes to be offered include:

Alcohol, Tobacco, and Other Drug Abuse: Challenges and	Special Agent Shirley Armstead, BA	
Responses for Faith Leaders	U.S. Drug Enforcement Administration	
Addiction 101	Wayne White, CASAC, & Kim White,	
	CASAC	
	Footprints, Inc. of Kansas City & Crossing	
	Freedom From Addiction of Sikeston	
Science-Based Drug Abuse Prevention	Alysia Harris, BA	
C	National Council on Alcoholism and Drug Abuse	
	– St. Louis	
History and Interpretation of the Twelve-Step Model	Wayne White, CASAC, & Kim White,	
	CASAC	
How to Approach the User	Scott Doty, BA, CSAC II	
***	Gibson Recovery Center of Cape Girardeau	
"I Lift My Eyes Unto the Mountain: From Where Will	Valerie Atkins, M.Ed, MA, CASAC	
My Help Come?" Finding and Accepting Help for the Helpers	The Empowered Church – St. Louis	
Co-Dependency & the Family Dynamics of Addiction	JoAnn Stovall, BA, CASCA, CCGC,	
	ICADC, CADCII	
	National Council on Alcoholism and Drug	
	Dependence of Greater Kansas City	
Concept of Co-Occurring Disorders: A Brief Introduction	Elayne C. Davis, BA, LCSW	
	Committed Caring Faith Communities	
Setting Up a Faith-Based Substance Abuse Program	Daphne Walker-Thoth, M.Ed &	
	Raymond D. Little, Sr., RASAC	
	Committed Caring Faith Communities &	
	Missouri Institute of Mental Health	
Screening & Appropriate Referrals, Certification/Licensure	Michelle Smart, MSW	
J 11 1	Consultant	
The Access to Recovery (ATR) Grant: Building on a	Debbie McBaine, BA	
Foundation of Rock	Missouri Division of Alcohol and Drug Abuse	
ATR Collaboration, Standards, and Outcomes	Mark Stringer, MA, LPC, NCC	
	Missouri Division of Alcohol and Drug Abuse	
ATR Information Systems	Mark Shields, M.Ed, LPC, CASAC,	
	Missouri Division of Alcohol and Drug Abuse	
Recovery Revival Demonstration	Pastor Isaac C. McCullough, BA, BS	
	Christ Community United Methodist Church	

Registration information is attached. For additional information, call (314) 951-1033.

3.2 continuing education units from Lincoln University or 32 contact hours from Missouri Substance Abuse Counselors' Certification Board will be issued. Participants must complete the entire Academy to receive continuing education units or contact hours.

Classes will be held daily from 9 a.m. to 5 p.m.

2005 Spring Addictions Academy Registration Form & Information

Addictions Academy Required for Faith Organizations to be Credentialed for ATR

Faith organizations interested in providing recovery support services under the Access to Recovery program are required to have a **minimum of two staff or volunteers** complete the Addictions Academy. Due to space and budget constraints, organizations may not send more than **three** participants. Graduates of the 2002, 2003, and 2004 academy are not required to retake the course, but will need to attend a regional day-long training on the Access to Recovery program. The Academy will be repeated in the fall in October 2005.

<u>Fees</u>

Aside from transportation to Jefferson City, there is no cost for faith organizations to send representatives to the Academy. Free double-occupancy lodging and meals will be provided. Participants who desire a private, single room will have to pay \$45 a night. A **\$25 refundable deposit must be submitted with each application**. The deposit will be returned to participants immediately upon graduation from the Academy. The deposit will not be returned to registrants who do not show up or who leave the Academy before it is over.

Registration Deadline

The registration deadline for the Academy is <u>May 2, 2005 and must be received at the CCFC office by this</u> <u>date</u>. Late registration will not be accepted, no exceptions. Space is limited, so registrants are encouraged to register early. <u>No onsite registrations will be accepted</u>.

2005 Addictions Academy Registration Form

Please <u>print or type</u> and mail completed form along with \$25 deposit for each registrant to: CCFC, Addictions Academy, 5400 Arsenal, Room A-314, St. Louis, MO 63139. Use separate registration form for each registrant and include \$25 for each registrant.

Make copies if necessary.

Name	Tala	phone ()
Name of Egith Organization	Enrollment Closed, Session Full, Enrollment Closed, Session Full, Enrollment Closed, Session Full, Enrollment	
Name of Faith Organization	Closed, Session Full, Enrollment Closed, Session Full,	
Your Position at Your Religion	Enrollment Closed, Session Full, Enrollment Closed,	
Denomination	Session Full, Enrollment Closed, Session Full, Enrollment	
	Closed, Session Full, Enrollment Closed, Session Full, Enrollment Closed, Session Full, Enrollment Closed,	
Your Mailing Address	Session Full, Enrollment Closed, Session Full, Enrollment	
01: 10: 1 (7)	Closed, Session Full, Enrollment Closed, Session Full,	
City/State/Zip	Enrollment Closed, Session Full, Enrollment Closed,	
E-mail Address	Session Full, Enrollment Closed, Session Full, Enrollment Closed, Session Full, Enrollment Closed, Session Full,	
	Enrollment Closed, Session Full, Enrollment Closed,	
Emergency Contact Name	Session Full,Enrollment Closed, Session Full,)
l odging & Meal Inform	nation: (Please check one)	
	manorii (i loada diladik dila)	
Gender:	☐ Male ☐ Female	
Meal Preference:	□ Regular meals □ Vegetarian meals	
D. Dagamus a dayabla assum	sangu raam far ma . I haya alraady aalaatad a raamm	ata and his/har name is
Reserve a double-occup	pancy room for me. I have already selected a roomma	ate and his/her hame is
-		
■ My spouse and I will roo		
a my spease and I will rec	om together. My spouse's name is	
, ,	om together. My spouse's name isoancy room for me. I need to be matched with a room	
☐ Reserve a double-occup☐ I prefer to pay for a priva		nmate.
□ Reserve a double-occup □ I prefer to pay for a priva I will share a bathroom	pancy room for me. I need to be matched with a room ate room. My payment of \$225 made payable to CCF with the adjoining room.	nmate. C is enclosed. I understand that
 □ Reserve a double-occup □ I prefer to pay for a prival will share a bathroom □ I prefer to stay at a near 	pancy room for me. I need to be matched with a room ate room. My payment of \$225 made payable to CCF	nmate. C is enclosed. I understand that
Reserve a double-occup I prefer to pay for a priva I will share a bathroom I prefer to stay at a near am responsible for ma	pancy room for me. I need to be matched with a room ate room. My payment of \$225 made payable to CCF with the adjoining room. by hotel so that I can have a private room and private	nmate. C is enclosed. I understand that
Reserve a double-occup I prefer to pay for a priva I will share a bathroom I prefer to stay at a near am responsible for ma I live in or near Jeffersor	pancy room for me. I need to be matched with a room ate room. My payment of \$225 made payable to CCF with the adjoining room. by hotel so that I can have a private room and private king and paying for my own reservations.	TC is enclosed. I understand that bathroom. I understand that I
Reserve a double-occup I prefer to pay for a priva I will share a bathroom I prefer to stay at a near am responsible for ma I live in or near Jeffersor	pancy room for me. I need to be matched with a room ate room. My payment of \$225 made payable to CCF in with the adjoining room. by hotel so that I can have a private room and private iking and paying for my own reservations. City and will not need overnight accommodations.	TC is enclosed. I understand that bathroom. I understand that I

Deposit Payment Method: Payment may be made by check or money order only. Credit card payments cannot

be accepted. Please make check or money order payable to CCFC.